

Prince William Health District

5 County Complex Court · Suite 240

Woodbridge, VA 22192 Phone: 703-792-6310

Fax: 703-792-4743

www.vdh.virginia.gov/LHD/PrinceWilliam

Date Issued

TO:

Contractor

Anywhere Street City, State Zip Code

FROM:

Prince William Health District, Division of Onsite and Water Services

SUBJECT:

Sewage Disposal System Installer Permit

Current Prince William County Sewage Disposal System Installer Permits expire 30 June, 20XX. Failure to renew your permit before the expiration date of your current permit will cause requests for inspections to be denied and may prompt further sanctions or actions by the District.

In order to renew your permit, please submit all information listed below to the Health District, in one complete package.

- 1. Completed Application
- 2. Installers Bond or Continuation Certification
- 3. Copy of your state contractor's license with SDS Specialty
- 4. Individual licensure for all employees of the company that intend to practice as an onsite sewage system installers from (DPOR) Department of Professional and Occupational Regulations Office
- 5. \$30.00 fee payable to Prince William County
- 6. Copy of your current Prince William County Business License or statement of exemption from the requirement to have such license

If you wish to set-up a meeting regarding installing systems in Prince William County, please contact the office at 703-792-6310 option 2. All meetings will take place at the Prince William Environmental Health District, Division of Onsite & Water Services, 5 County Complex Court - Suite #240, Woodbridge, Virginia 22192. Please contact Senior Environmental Health Specialist, James LaRosa, at (703) 792-6314 to schedule an individual conference or if you have any questions.



PRINCE WILLIAM HEALTH DISTRICT

ENVIRONMENTAL HEALTH

APPLICATION FOR

SEWAGE DISPOSAL SYSTEMS INSTALLERS LICENSE

Applicant	1	Phone #	
Address			
Street	City	State	Zip
Business Name		Phone #	
Address			
Street	City	State	Zip
I have read and understo	and the provisions of the Code of	and the State Boar	rd of Healt
I have read and understoners of the series o	and the provisions of the Code of Regulations.	and the State Boar	rd of Healti
To further satisfy the reconference/discussion of the State and local Health Department reg	equirements of the Health Dist te Board of Health Sewage Hand quirements.	rict, I have partic lling and Disposal	cipated in Regulation
	Signature of Applicat	nt	Date

SEWAGE DISPOSAL SYSTEM - INSTALLERS BOND

WHEREAS, the said principal has applied for a license to engage in the installation of individual sewage disposal systems in Prince William County, Virginia;

WHEREAS, the said license contains certain conditions and requirements and that a certain ordinance entitled ASewage Disposal Ordinance≅, is applicable to such installations of individual sewage disposal systems in Prince William County, Virginia;

WHEREAS, it is the desire of the principal and surety hereunder to guarantee to the Board of County Supervisors of Prince William County, Virginia, that the conditions set forth in the said license and that the requirements of certain ordinance entitled and ASewage Disposal Ordinance≅, Prince William County, Virginia to be complied with;

NOW THEREFORE, the conditions of this bond are such that if the above named principal shall comply with the said permit and indemnify and save harmless the said Board of County Supervisors of Prince William County, Virginia, as well as any person, firm or corporation, from all expense or damage that may be incurred by such, caused by any failure to comply with the provisions of the said A Sewage Disposal Ordinance, then the above obligation to be and of no effect, otherwise this obligation shall be in full force and effect, but in no event is the liability of the surety here-under to exceed the amount of this bond.

The bond to be executed for one year to ex	pire June 30, 20	
Signed, sealed and delivered this _	day of 20	
	(SEAL)	
	Principal	
	(SEAL)	
	Surety	
STATE OF VIRGINIA		
COUNTY OF	, TO WIT:	
Ι,	, a Notary Public in and for the State and County	
	, agent of the above named surety, whose	
name is signed to the writing above bearing	the date and the day of,	
20, has acknowledged the same before	me this day of 20	
	Notary Public	
	My Commission expires:	
STATE OF VIRGINIA		
COUNTY OF	, TO WIT:	
	, a Notary Public in and for the State and County	
	, agent of the above named surety, whose	
	the date and the day of,	
	me this day of 20	
	20	
	Notary Public	
	My Commission expires:	